

Be 10-23-00

19.72x

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>My</i>		<i>9/18/00</i>
O.I.P.E. CLASSIFIER		<i>19</i>	<i>22-00</i>
FORMALITY REVIEW	<i>TL</i>	<i>902</i>	<i>10/20/00</i>
RESPONSE FORMALITY REVIEW	<i>MT</i>	<i>549</i>	<i>12-19-00</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
= ..... Allowed      I ..... Interference  
- (Through numeral)... Canceled      A ..... Appeal  
+ ..... Restricted      O ..... Objected

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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